CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

| The New York and Presbyterian Hospital | |
|---|--------------|
| * PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE | |
| Prefix: * First Name: Anne | Middle Name: |
| * Last Name: Sperling | Suffix: |
| * Title: VP of Government and Community Affairs | |

OMB Number: 4040-0004 Expiration Date: 12/31/2022

| Application for | Federal Assista | nce SF-4 | 24 | | | |
|--|---|-------------|--------------------|-------|---|--|
| * 1. Type of Submiss Preapplication Application Changed/Corre | | | | | | |
| * 3. Date Received: 06/10/2020 | 4. Applicant Identifier: | | | | | |
| 5a. Federal Entity Ide | 5a. Federal Entity Identifier: 5b. Federal Award Identifier: | | | | | |
| State Use Only: | | | | , I r | | |
| 6. Date Received by | State: | 7 | . State Applicatio | n Ide | entifier: | |
| 8. APPLICANT INFO | ORMATION: | | | | | |
| * a. Legal Name: | he New York an | nd Presby | terian Hospi | tal | | |
| * b. Employer/Taxpay | yer Identification Nu | mber (EIN/T | N): | 1 I r | * c. Organizational DUNS: 0127294760000 | |
| d. Address: | | | | _ | | |
| * Street1: Street2: * City: | Street2: | | | | | |
| County/Parish: * State: Province: | | | | | NY: New York | |
| * Country: | | | | | USA: UNITED STATES | |
| * Zip / Postal Code: 100654805 | | | | | | |
| e. Organizational U | Jnit: | | | | | |
| Department Name: | | | |] [| Division Name: | |
| f. Name and contac | ct information of p | erson to be | contacted on r | natte | ers involving this application: | |
| Prefix: Middle Name: | | | * First Nar | ne: | Annie | |
| * Last Name: Pur | *Last Name: Purcell Suffix: | | | | | |
| Title: Grant Writ | er | | | | | |
| Organizational Affilia | tion: | | | | | |
| * Telephone Number | * Telephone Number: (b)(6) Fax Number: | | | | | |
| * Email: (b)(6) | | | | | | |

| Application for Federal Assistance SF-424 |
|---|
| * 9. Type of Applicant 1: Select Applicant Type: |
| M: Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) |
| Type of Applicant 2: Select Applicant Type: |
| |
| Type of Applicant 3: Select Applicant Type: |
| |
| * Other (specify): |
| |
| * 10. Name of Federal Agency: |
| Department of Homeland Security - FEMA |
| 11. Catalog of Federal Domestic Assistance Number: |
| 97.132 |
| CFDA Title: |
| Financial Assistance for Targeted Violence and Terrorism Prevention |
| * 12. Funding Opportunity Number: |
| DHS-20-TTP-132-00-01 |
| * Title: |
| Fiscal Year (FY) 2020 Targeted Violence and Terrorism Prevention (TVTP) Program |
| |
| |
| |
| 13. Competition Identification Number: |
| |
| Title: |
| |
| |
| |
| 14. Areas Affected by Project (Cities, Counties, States, etc.): |
| Add Attachment Delete Attachment View Attachment |
| Add Attachment |
| * 15. Descriptive Title of Applicant's Project: |
| NewYork-Presbyterian Hospital Active Shooter Training and Awareness |
| |
| |
| Attach supporting documents as specified in agency instructions. |
| Add Attachments Delete Attachments View Attachments |
| |

| 16. Congressional Districts Of: | |
|---|--|
| * a. Applicant NY-12 * b. Program/Project NY-12 | |
| Attach an additional list of Program/Project Congressional Districts if needed. | |
| Add Attachment Delete Attachment View Attachment | |
| 17. Proposed Project: | |
| * a. Start Date: 09/30/2020 * b. End Date: 09/29/2022 | |
| 18. Estimated Funding (\$): | |
| * a. Federal 149,985.00 | |
| * b. Applicant 0.00 | |
| * c. State 0 . 00 | |
| * d. Local 0.00 | |
| * e. Other 0 . 00 | |
| * f. Program Income 0.00 | |
| *g. TOTAL 149,985.00 | |
| * 19. Is Application Subject to Review By State Under Executive Order 12372 Process? a. This application was made available to the State under the Executive Order 12372 Process for review on b. Program is subject to E.O. 12372 but has not been selected by the State for review. c. Program is not covered by E.O. 12372. * 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.) Yes No If "Yes", provide explanation and attach Add Attachment Delete Attachment View Attachment 21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) | |
| Subject the to chiminal, civil, or administrative penalties. (0.5. Code, Title 216, Section 1001) | |
| | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. Authorized Representative: | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. Authorized Representative: Prefix: * First Name: Anne | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. Authorized Representative: Prefix: | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. Authorized Representative: Prefix: * First Name: Anne Middle Name: * Last Name: Sperling | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. Authorized Representative: Prefix: | |
| ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. Authorized Representative: Prefix: * First Name: Anne Middle Name: * Last Name: Sperling Suffix: * Title: VP of Government and Community Affairs | |

The Department of Homeland Security (DHS) Fiscal Year 2020 Targeted Violence and Terrorism Prevention (TVTP) Grant Program Application

Funding Opportunity Number: DHS-20-TTP-132-00-01

Applicant: NewYork-Presbyterian Hospital 525 East 68th Street New York, NY 10065

Replication Track: Training and Awareness Raising

Amount of Funds Requested: \$149,985.00

NewYork-Presbyterian Hospital is proposing to enhance our Active Shooter training through the creation of certified "Training Champions," and a Threat Assessment Team who are fully trained to identify and respond to potential threats. Our Training Champions and Threat Assessment Team will attend Officer Safety and Awareness Training, Mental Health First Aid courses, and Targeted Violence/Threat Assessment Training, then update our training protocols for both Security Officers and hospital staff. These training protocols will be specific to the unique circumstances healthcare institutions face, for whom there is currently a dearth of specifically designed Active Shooter resources. Ultimately, we hope to reach all 800 Security Officers and 47,000 hospital employees, as well as continue our work providing training for community members, external partners, and other hospitals nationwide.

1. Needs Assessment

Until recently, healthcare systems have not been considered high-threat targets in terms of targeted violence and terrorism. However, according to the FBI, healthcare facilities have been victims of Active Shooter incidents at approximately the same rate as religious institutions – and many hospitals are also affiliated with institutions of education, which comprised over a fifth of Active Shooter incidents between 2000 and 2018. Recent events like the COVID-19 pandemic have made hospitals a much more attractive target to Homegrown Violent Extremists (HVE) planned attacks as well. Nationwide, shooting events in hospitals have doubled in the past decade.² Compounding the issue, is the fact not all hospital-based shootings are categorized active shooter events. A 2012 Johns Hopkins study found that from 2000-2011, there were 154 hospital based shootings, with a total of 235 people killed and injured. ³ Familiar and rising threats, including white supremacist groups, 4 COVID-19 related incidents, 5 and international terrorist incidents, as well as high levels of workplace violence, 6 indicate healthcare organizations must take a more proactive approach to their safety.

Although a large number of hospitals have Active Shooter protocols and awareness training in place, few have addressed the unique challenges and considerations in healthcare. Even fewer have responded by creating preventative violence plans that include robust threat assessment or management teams to adequately address the increasing volume of potential threats. NewYork-Presbyterian Hospital (NYP) is seeking not only to be a leader in healthcare and patient care experience, but to be a leader in targeted violence and terrorism prevention as well.

With some 4,000 beds and 10,200 affiliated physicians, NYP sees more than 3.4 million patient visits annually. A renowned center of medical excellence, NYP is affiliated with two top ranked academic medical institutions, Weill Cornell Medicine and Columbia University Vagelos College of Physicians and Surgeons. In total NYP has over 47,000 employees across ten campuses throughout the greater New York City area. In addition to patients and staff, we welcome family and friends of patients and academic professionals from across the globe.

As a major academic medical institution with multiple campuses in the heart of a large, racially and ethnically diverse city, NYP may be considered a target for attackers with a variety of motivations; racially or ethnically motivated violence (REMV), individuals or groups seeking high-profile targets – potentially in connection to COVID-19 – as well as individuals with personal grudges against medical personnel or the healthcare facility.

There are unique challenges to active shooter planning and preparedness in a hospital setting – open and easily accessible 24/7 with a vulnerable population, many of whom are not ambulatory and cannot be evacuated. In addition, the majority of clinicians and hospital staff will not leave their patients, continuing to administer to them even if their own safety is at risk. Hospital safety

¹ Quick Look: 277 Active Shooter Incidents in the United States from 2000 to 2018. Federal Bureau of Investigation, 2019.

² Kelen, Catlett, Kubit & Hsieh, 2012: Johns Hopkins, Annals of Emergency Medicine, 60(6), 790-798.

³ Kelen, Catlett, Kubit & Hsieh, 2012.

⁴ Department of Homeland Security Strategic Framework for Countering Domestic Terrorism and Targeted Violence, Department of Homeland Security, 2019.

⁵ White Supremacist in COVID-19 Hospital Bomb Plot Allegedly Wanted to Attack Power Grid. Homeland Security Today, March 2020.

⁶ Workplace Violence in Healthcare. Occupational Health and Safety Administration, 2015.

training must stress mental preparedness, planning, and situational awareness, but must also acknowledge that the majority of caregivers will not leave their patients in an active shooter scenario, and may have a limited number of options to relocate their patients to a hiding place.

Programs like Mental Health First Aid are vital in raising awareness of the top five mental health areas - depression, anxiety, suicide, psychosis and substance abuse – that are implicated in Active Shooter Incidents, and would be a keystone of our proposed Targeted Violence and Terrorism Prevention program at NYP. It is our belief that every Security Officer, as well as every community member, should have a baseline knowledge of mental health.

NYP offers Active Shooter training for hospital Security Sergeants and Officers, and all other hospital employees. Both aim to increase situational awareness, allowing employees to identify potential threats, and improve reactions to an active shooter scenario. Between September and December 2019, NYP trained 1,420 employees over 125 training sessions in Active Shooter Awareness. NYP also held three table-top exercises between November 2019 and February 2020. Currently, NYP's Security training capabilities includes Active Shooter Awareness, Deescalation of Aggressive Behavior, and Infant and Child Abduction.

We are seeking to enhance our training capability to create an option to Run-Hide-Fight, continuing to improve our ability to respond to Targeted Violence in a manner suitable for a hospital setting. NYP is applying for the DHS Targeted Violence and Terrorism Prevention (TVTP) Grant program under the Replication Track, Training and Awareness Raising. This program would enhance existing training, and fill a training gap in NYP's capabilities under Objective 1: Strengthen societal resistance against the drivers of violence extremism and ensure broad awareness of the threat of targeted violence and terrorism. Enhancing preparedness on identifying, assessing and managing persons of concern can prevent targeted violence and protect the community as well as our employees, patients, and visitors to NYP.

2. Program Design

Problem Statement: NYP has an existing Active Shooter Awareness training program, but requires additional resources in order to improve access to vital certifications and "Train-the-Trainer" trainings. Access to these resources would significantly improve our ability to extend the reach of our program to more hospital employees and additional subject matter, as well as allow NYP to pass our knowledge onto additional healthcare systems and the community at large.

Goals: Training and Awareness Raising: Strengthen NYP's resistance against the targeted violence and terrorism, and ensure broad awareness of the threat of targeted violence and terrorism.

Objectives:

- 1. Increase awareness of the potential threat of targeted violence and terrorism to healthcare.
- 2. Build threat assessment and management capability by providing training.
- 3. Engage in community outreach in targeted violence and terrorism.

Logic Model:

THEORY OF CHANGE: If key staff receive comprehensive Train-the-Trainer trainings on targeted violence and terrorism prevention and Mental Health First Aid, NYP can develop a more effective training program for all NYP employees. This will allow Security Officers and hospital employees to have an enhanced ability to identify the pre-attack behavioral signs of targeted violence, and ability to respond.

SHORT TERM OUTCOMES:

- 1. Key staff receive Threat Assessment Training, Mental Health First Aid "Train-the-Trainer" certifications, enabling them to update NYP's training materials.
- 2. Security Officers receive Officer Safety and Awareness Training.
- Other NYP Security Officers and employees receive updated training, increasing their knowledge of pre-attack behavioral signs of targeted violence and ability to respond.

LONG TERM OUTCOMES:

- 4. Prevention and mitigation of targeted violence at our facilities and in the communities we serve.
- 5. NYP is able to maintain improved programming through certification of training staff.
- 6. Dissemination of NYP's Active Shooter Training to hospitals and healthcare institutions nationally.

CONTEXTUAL FACTORS AND UNDERLYING ASSUMPTIONS:

NYP requires certified and experienced trainers to manage and implement the program at each campus in a standardized fashion. We will require resources provided by the hospital, including space, personnel costs, and technology resources, to schedule and host in-person and virtual training events. We have the full support of the hospital to host training, in order to improve the resilience of the hospital and its staff in the event of a Targeted Violence Incident.

| INPUT | ACTIVITIES | OUTPUTS | OUTCOMES |
|--|--|---|---|
| 1 Instructor 5-6 Security Sergeants, designated as "Training Champions" | Mental Health First Aid certification Training Director and Training Sergeant update Hospital Trainings | Trained "Training Champions" 760 Security Sergeants and Officers trained | Improved ability for staff to identify and respond to individuals in Mental Health Crisis |
| Officer Safety Training Instructor | Officer Safety Training for Security Personnel | 760 Security Sergeants and Officers trained | Security Dept. receives drills and training in active shooter hospital response Enhanced awareness and response to potential acts of targeted violence and terrorism among Security Officers |
| 2 FT NYP employees, designated as Trainers Subject Matter Experts | Targeted Violence and Terrorism Prevention training for designated Trainers Trainers create and update training for NYP staff Trainers train NYP staff | 2 FT NYP Trainers NYP non-Security staff are trained | Training provided to all NYP employees Enhanced active shooter and workplace violence prevention training for all NYP employees |

| INPUT | ACTIVITIES | OUTPUTS | OUTCOMES |
|---|--|---|---|
| 6-10 Security Sergeants, designed as Threat Assessment Team (TAT) members Subject Matter Experts | Draft process and policy for TAT Conduct specialized training for TAT members | 6-10 Trained TAT members TAT policy and procedures | TAT accepting case referrals to address persons of concern Enhanced ability to respond to potential incidents of Targeted Violence and Terrorism |
| 2 FT employees 20 Security Directors/Managers 25 Security Sergeants | Identify community leaders Conduct Targeted Violence and Terrorism training | Community groups receive Targeted Violence and Terrorism training | Awareness raised in community; improved ability to identify and respond to threats |

3. Organization and Key Personnel

In 2019, NYP hired a new corporate Director of Training and Technology in the Security and Emergency Management Department, Barbara Daly. Ms. Daly's first order of business as Director of Training was to revamp NYP's Active Shooter Awareness training to include the preattack behavioral indicators of targeted violence, drawing from the current research, including DHS, FBI, USSS, NYPD, and subject matter experts from the larger international threat assessment community. Prior to coming to NYP, Ms. Daly has thirty years of experience in Crisis Management, Behavioral Analysis, and Intelligence, and has a wealth of experience in training and management. As the Program Manager, Ms. Daly will oversee the implementation of the proposed training program.

Angel Caceres is the Training Sergeant in the Security & Emergency Management Department at NewYork-Presbyterian. Mr. Caceres has worked as a Training Instructor at NYP for fifteen years, and has taught topics such as Active Shooter, De-Escalation, and Threat Assessment, among others. Mr. Caceres also oversees Security Officers at Columbia University's Irving Medical Campus, one of NYP's academic hospitals. Mr. Caceres is experienced in planning, preparing, and evaluating training materials, and will assist Ms. Daly in overseeing training of NYP Security Officers, as well as attending proposed trainings.

4. Sustainability

The proposed program will have cascading benefits for NYP, as well as hospitals nationwide. Employees receiving certifications will be more knowledgeable and capable to respond in an emergency, and will improve our training procedures for all hospital employees, increasing awareness and ability to respond to targeted violence and terrorism. Once the initial training certifications are acquired and training champions are put in place, the program will eventually train nearly 800 Security Officers and over 47,000 hospital employees, protecting the millions of visitors our hospitals see on an annual basis. NYP will continue to keep abreast of research and trends, to update and refresh our training protocols. In support of this training endeavor and to show our support for crisis management, NYP is in the process of outfitting a 24/7 Operations Center for Emergency Management at our Westchester Behavioral Health Center.

As a leader in our field, NYP also feels the responsibility to share our trainings and programming in healthcare threat assessment with other hospitals and community members. In 2019 and 2020, NYP provided training for the Association of Threat Assessment Professionals (ATAP) and the Metropolitan Hospital Security Directors Association (MSHDA), on Homegrown Violent Extremism and the Threat to Healthcare, which discussed both domestic and international terrorism trends as well as the "new normal" for healthcare. We are committed to continuing to provide training for other institutions and community members going forward. It is our hope that our training program will serve as a model for other hospitals nationwide.

5. Budget Detail and Narrative

| Budget Worksheet Budget Category | Federal Request |
|---|-----------------|
| Personnel | \$0 |
| Fringe Benefits | \$0 |
| Travel | \$10,000.00 |
| Supplies | \$6,350.00 |
| Contractual | \$0 |
| Other | \$120,000.00 |
| Total Direct Costs | \$136,350.00 |
| Indirect Costs | \$13,635.00 |
| TOTAL PROJECT COSTS | \$149,985.00 |

TRAVEL (\$10,000): The budget for travel includes accommodations and transportation for the instructor of the Officer Safety and Awareness Training, as well as for NYP employees to attend off-site training.

SUPPLIES (\$6,350): This program will necessitate the acquisition of Training Materials including manuals, tablets, and Chromebooks for online learning, as well as office supplies.

OTHER (\$120,000):

Officer Safety and Awareness Training (\$50,000): This training involves an instructor coming to NYP over the course of several weeks and training our Security Officers and Sergeants in groups of 10. Our Training Sergeant and Training Director will then update our staff training, create a new online learning module, as well as create new Table Top and Full Exercises.

Mental Health First Aid Train-the-Trainer (\$30,000): Mental Health First Aid is a skills-based training course that teaches participants about mental health and substance-use issues. It is an evidence-based, effective course that grows knowledge of signs, symptoms, and risk factors of mental illness and addiction, and provides resources for participants. This program would be attended by 5-6 NYP Security Officers, who would then train additional NYP security personnel.

<u>Targeted Violence/Threat Assessment Training (\$20,000):</u> Threat Assessment training would involve a series of contracted speakers coming to our facility and training our designated Threat Assessors over the course of several days, with 10 students per class to allow for social distancing.

OTVTP Implementation & Measurement Plan

You should modify the Implementation & Measurement Plan (IMP) template to the number of outcomes your specific project requires. For *each* outcome in the IMP, create an Implementation Plan table *and* a Measurement Plan table. Please use the definitions provided in the IMP guidance document when crafting your plan. Draft, in the box below, the overarching goal statement for the project. Following completion of the IMP, each grantee is expected to complete the Risk Assessment & Mitigation Plan in Appendix A.

In the Implementation Plan table:

- Type each activity in a separate row; add as many rows as needed.
- Arrange activity rows chronologically by the start date of the activity.
- This IMP should span both years of performance under this grant program.

In the Measurement Plan table:

- Type each outcome indicator in a separate row.
- Include indicators that will help measure the results of the project; it is not necessary to have more than one indicator if that indicator sufficiently measures results.
- Identify and/or design data collection methods to be used to obtain the data that will be reported on quarterly.
- Ensure attention to collection of data that can be broken down by sex and age of project participants or beneficiaries.

NOTE: Data collection methods should be specific and timebound. Any expenses incurred from the collection of data must come from the grant already awarded. No additional funds will be made available by DHS for this purpose.

| Organization Name | NewYork-Presbyterian Hospital |
|------------------------------|---|
| Project Title | OTVTP Grant Program: Targeted Violence and Terrorism Training and Awareness |
| Grant Number | DHS-20-TTP-132-00-01 |
| Grant Implementation Period: | 24 months |
| Reporting Period: | 10/01/2020 - 09/30/2022 |

| Goal Statement: |
|---|
| NYP has an existing Active Shooter Awareness training program, but requires additional resources in order to improve access to vital certifications and "Train-the-Trainer" trainings. Access to these resources would significantly improve our ability to extend the reach of our program to more hospital employees and additional subject matter, as well as allow NYP to pass our knowledge onto additional healthcare systems and the community at large. In improving and enhancing our Active Shooter training, we can increase targeted violence and terrorism awareness, and our ability to respond to imminent or unfolding targeted violence and terrorism, protecting our staff, patients, and the communities we serve. |
| Target Population: |
| NewYork-Presbyterian Hospital employs approximately 47,000 staff members across our 10 campuses. These staff work directly with our large and diverse patient population, whose visits to our campus number approximately 3.4 million annually. Our patient population is extremely diverse, with 45% of patients speaking a language other than English as their first language. In the New York City patient population, 85.5% are from minority populations (especially Black and Hispanic/Latino), higher than the NYC average of 67%. |
| |
| |

OUTCOME 1: Increase awareness of the potential threat of targeted violence and terrorism to healthcare

Mid-Term Outcome 1.1: Obtain Mental Health First Aid certifications and train all Security Sergeants and Officers

Mid-Term Outcome 1.2: Conduct Officer Safety Training for all Security Sergeants and Officers

Mid-Term Outcome 1.3: Obtain Targeted Violence and Terrorism training and offer training to NYP employees

OUTCOME 1 IMPLEMENTATION PLAN

| Activity | Inputs/Resources | Time Frame | Anticipated Outputs | Progress Reporting (Complete for Progress Report Only) |
|---|--|---------------|--|--|
| Mental Health First Aid certification training | 1 instructor 5-6 employees | 6-12 months | 760 Security Sergeants and Officers trained | |
| Officer Safety Training | 1 contractor | 6-12 months | 760 Security Sergeants and Officers trained | |
| Targeted Violence and Terrorism prevention training | Multiple subject matter experts 2 FT employees | 6-18 months | Training received for FT trainers and offered to all NYP employees | |

OUTCOME 1 MEASUREMENT PLAN

| Outcome Indicator(s) | Data Collection Method and Timeframe | Results (Complete for Progress Report Only) |
|--|---|---|
| Mental Health First Aid certifications obtained for 5-6 trainers | Data Collection: Data will be collected and tracked via online learning system (Learning Center) registration and | |
| Mental Health First Aid training scheduled and delivered for 760 Security Sergeants and Officers | completion of course. | |
| | Timeframe 6-12 months to completion. | |
| Officer Safety training scheduled and delivered to | Data Collection: Data will be collected | |
| 760 Security Sergeants and Officers | and tracked via online learning system | |
| Targeted Violence Prevention and Terrorism Prevention training received for FT trainers and | (Learning Center) registration and completion of course. | |
| scheduled and conducted for NYP employees | Timeframe: 6 months to completion for | |
| | Officer Safety Training, and 24 months | |
| | for NYP employees to receive Targeted | |
| | Violence and Terrorism Prevention | |
| | training. | |

OUTCOME 2: Build threat assessment and management capability through training

Mid-Term Outcome 2.1: Select threat assessment team members, draft process and policy Mid-Term Outcome 2.2: Conduct specialized training for threat assessment team members

OUTCOME 2 IMPLEMENTATION PLAN

| Activity | Inputs/Resources | Time Frame | Anticipated Outputs | Progress Reporting (Complete for Progress Report Only) |
|---|--|-------------|--------------------------------------|--|
| Select Threat Assessment Team (TAT) members | 6-10 core members | 3 months | 6-10 members selected | |
| Draft process and policy | 2-3 core members | 3 months | Policy and process approved | |
| Conduct specialized training for TAT | 6-10 core members Ad hoc members | 6-18 months | TAT members trained and/or certified | |

OUTCOME 2 MEASUREMENT PLAN

| Outcome Indicator(s) Data Collection Method and Timeframe | | Results (Complete for Progress Report Only) | |
|---|--|---|--|
| TAT selected Policy and process drafted and approved Specialized training given | Data Collection: Measured by number of TAT members trained, cases referred, opened, handled, closed, service referrals Timeframe: 18 months | | |

OUTCOME 3: Engage in external community outreach and liaison by providing education on targeted violence and terrorism

Mid-Term Outcome 3.1: External community outreach and liaison

Mid-Term Outcome 3.2: Provide education on targeted violence and terrorism

OUTCOME 3 IMPLEMENTATION PLAN

| Activity | Inputs/Resources | Time Frame | Anticipated Outputs | Progress Reporting (Complete for Progress Report Only) |
|--|--|--------------|-----------------------------------|--|
| External community outreach/liaison | FT trainers; Security Directors, Managers, Sergeants | 12-18 months | Contacts/opportunities identified | |
| Provide education on targeted violence and terrorism | FT trainers | 18-24 months | Community groups trained | |

OUTCOME 3 MEASUREMENT PLAN

| Outcome Indicator(s) | Data Collection Method and Timeframe | Results (Complete for Progress Report Only) |
|--|---|---|
| Interested community groups identified and training provided | Data Collection: Sign in log, data collected at time of training and compiled and analyze annually. | |
| | Timeframe: Ongoing throughout project period. | |

APPENDIX A: RISK MANAGEMENT PLAN

The following risk assessment chart is designed to assist in the identification of potential occurrences that would impact achieving project objectives, primarily those originating externally and that are outside of the organization's control. Risks could include, but are not limited to: economic, social, or political changes; changes to planned partnerships; legal or compliance changes; or other risks unique to this project. Use the chart below to identify these risks; add additional rows if necessary.

| Risk Identified | Likelihood of Risk Occurring (low/medium/high) | Risk Analysis (brief assessment of the impact the identified risk could/would have on the project) | Risk Management Plan (plan to minimize the impact that the risk presents to the project and adjustments to be made if the risk transpires) |
|---|--|--|--|
| Training could not be scheduled or attended due to COVID-19 restrictions and/or other hospital priorities | Medium-High | Project delayed until training can occur | If training is cancelled due to COVID-19 restrictions, or training cannot be attended due to hospital priorities (COVID-19), attend online and virtual training opportunities until in-person training can be attended |
| Classes are full or cancelled due to unforeseen circumstances | Low | Project delayed until training can occur. | Alternate training sites/locations will be identified, moving to virtual opportunities if necessary. |

Withheld pursuant to exemption

(b)(6)

Eric J. Weiss

Northeast Chapter President Association of Threat Assessment Professionals

June 5, 2020

Barbara Daly Director of Training and Technology, Emergency Management NewYork-Presbyterian Hospital 525 E 68th Street New York, New York 10065

Dear Office for Targeted Violence and Terrorism Prevention,

I am pleased to write this letter of support for NewYork-Presbyterian Hospital's grant application for the Fiscal Year 2020 Targeted Violence and Terrorism Prevention (TVTP) Grant Program, offered by The Department of Homeland Security.

Barbra Daly is a member of the Association of Threat Assessment Professionals (ATAP) in good standing. ATAP is an exclusive organization of professionals in the field of threat assessment. Only those with verifiable expertise in this field are permitted to become a member. Barbara Daly's experience as a Federal Bureau of Investigation, Special Agent tasked with the role of Behavioral Analysis Unit (BAU) Coordinator for the New York Field Office has been invaluable to ATAP. Barbara Daly has provided training and case studies at countless ATAP seminars and conferences. Barbara Daly has been instrumental in creating and maintaining relationships with threat assessment professionals from other metropolitan healthcare organizations. In June of 2019 Barbary Daly became an ATAP Certified Threat Manager (CTM). The CTM is an invitation only examination that evaluates ones knowledge of threat assessment. At this time, the failure rate for the CTM is over 45 percent. With the grant, Barbara Daly and New York-Presbyterian Hospital will continue to collaborate with ATAP and other healthcare organizations in pursuit of the common goal of preventing targeted violence and terrorist attacks. This will be accomplished through meetings, working groups, training and networking. One of the biggest hindrances to accomplish this goal is funding, that's why this grant is so important to Barbara Daly and her organization.

NewYork-Presbyterian has a long history of fostering partnerships between community, hospital, and academic organizations to positively impact the health and well-being of the communities in which it operates. I am eager to support this new initiative and look forward to the success stories to come.

Please do not hesitate to contact me with any questions or concerns. Thank you for your consideration.

Sincerely,

Eric J. Weiss Northeast Chapter President Association of Threat Assessment Professionals

Eric J. Weiss

Northeast Chapter President Association of Threat Assessment Professionals

Direct: 646-294-0160 www.atapworldwide.org June 11, 2020

Barbara Daly Director of Training and Technology, Emergency Management NewYork-Presbyterian Hospital 525 E 68th Street New York, New York 10065

Dear Office for Targeted Violence and Terrorism Prevention,

I am pleased to write this letter of support for NewYork-Presbyterian Hospital's grant application for the Fiscal Year 2020 Targeted Violence and Terrorism Prevention (TVTP) Grant Program, offered by The Department of Homeland Security.

I previously had the opportunity to work directly with Barbara Daly for close to fifteen years in federal law enforcement, focusing primarily on violent crimes such as homicides, interstate stalking, extortion and deviant sexual actors. I also had the pleasure of supervising Ms. Daly when she was assigned to the crisis management squad, where she actively researched human behavioral analysis, targeted violence, threat indicators and active shooters. Ms. Daly frequently conducted informative training and outreach efforts in these fields for various public and private sector entities.

I can attest to Ms. Daly's professionalism and persistence as a subject matter expert in the these fields and highly recommend her for consideration in this grant program.

Please do not hesitate to contact me with any questions or concerns. Thank you for your consideration.

Sincerely,

Jeffrey D. Markheim

THE CITY UNIVERSITY OF NEW YORK



Office of the University Director of Public Safety 555 West 57th Street (Suite 1030) New York, NY 10019 Tel: (646) 664-2900 | Fax: (646) 664-2912

June 12, 2020

Comment of the second sections

Barbara Daly Director of Training and Technology, Emergency Management NewYork-Presbyterian Hospital 525 E 68th Street New York, New York 10065

Dear Office for Targeted Violence and Terrorism Prevention,

I am pleased to write this letter of support for NewYork-Presbyterian Hospital's grant application for the Fiscal Year 2020 Targeted Violence and Terrorism Prevention (TVTP) Grant Program, offered by The Department of Homeland Security.

As a major University system with over 300,000 students, faculty and staff, we are dependent upon our health-care partners for support in the emergency care for any injured and ill persons on our campuses. In addition, the training and collaboration potential between our organizations are crucial for enhancing the ability to minimize any adverse effects of violent acts. This could be evidenced through programs such as a "stop the bleed" and first aid training. In mass casualty events, effective coordination between New York-Presbyterian and our University would be essential for the most effective and efficient care of our population. In addition, Barbara Daly and I have worked extensively on targeted violence and active shooter presentations for which she is highly regarded for her deep knowledge base and research.

NewYork-Presbyterian has a long history of fostering partnerships between community, hospital, and academic organizations to positively impact the health and well-being of the communities in which it operates. I am eager to support this new initiative and look forward to the success stories to come.

Please do not hesitate to contact me with any questions or concerns. Thank you for your consideration.

Sincerely, /

Michael Ferrandino

The second second

Director, Operations and Budget

Program Support Center Financial Management Portfolio Cost Allocation Services

26 Federal Plaza, Room 3412 New York, NY 10 278 PHONE: (212) 264-2069 FAX: (212) 264-5478

EMAIL: CAS-NY (a psc.hhs.gov

May 6, 2016

Ms. Phyllis Lantos
Executive Vice President, CFO and Treasurer
The New York & Presbyterian Hospital
525 East 68th St. Box 156
New York, NY 10021

Dear Ms. Lantos:

A copy of an indirect cost rate agreement is being sent to you for signature. This agreement reflects an understanding reached between your organization and a member of my staff concerning the rate(s) that may be used to support your claim for indirect costs on grants and contracts with the Federal Government.

Please have the agreement signed by an authorized representative of your organization and returned to me by email, retaining the copy for your files. Our email address is cas-ny@psc.hhs.gov. We will reproduce and distribute the agreement to the appropriate awarding organizations of the Federal Government for their use.

An indirect cost rate proposal, together with the supporting information, is required to substantiate your claim for indirect costs under grants and contracts awarded by the Federal Government. Thus, your next proposal based on actual costs for the fiscal year ending December 31, 2017 is due in our office by June 30, 2018. Please submit your next proposal electronically via email to CAS-NY@psc.hhs.gov.

Sincerely, (b)(6)

Darryl W. Mayes Deputy Director Cost Allocation Services

HOSPITALS RATE AGREEMENT

| | (b)(6) | | |
|------|--------|--|--|
| EIN: | | | |
| | | | |

ORGANIZATION:

The New York & Presbyterian Hospital (Formerly: The New York & Presbyterian Hospitals Care Network.)

525 East 68th St. Box 156

New York, NY 10021-

DATE:05/06/2016

FILING REF .: The preceding

agreement was dated

02/03/2011

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: INDIRECT COST RATES

RATE TYPES:

FIXED

FINAL

PROV. (PROVISIONAL)

PRED. (PREDETERMINED)

EFFECTIVE PERIOD

| TYPE | FROM | TO | RATE(%) LOCATION | APPLICABLE TO |
|-------|------------|------------------|------------------|--|
| FINAL | 01/01/2013 | 12/31/2015 | 73.00 On-Site | Research |
| PRED. | 01/01/2016 | 12/31/2018 | 73.00 On-Site | Research |
| FINAL | 01/01/2013 | 12/31/2015 | 25.00 Off-Site | Research |
| PRED. | 01/01/2016 | 12/31/2018 | 25.00 Off-Site | Research |
| FINAL | 01/01/2013 | 12/31/2015 | 40.80 On-Site | Other Sponsored Programs |
| PRED. | 01/01/2016 | 12/31/2018 | 40.80 On-Site | Other Sponsored Programs |
| PROV. | 01/01/2019 | Until Amended | | Use same rates and conditions as those cited for fiscal year ending December 31, 2018. |

ORGANIZATION: The New York & Presbyterian Hospital (Formerly: The

New York & Presbyterian Hospitals Care Network.)

AGREEMENT DATE: 5/6/2016

SECTION III: GENERAL

A. LIMITATIONS:

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its indirect cost pool as finally accepted: such costs are legal obligations of the organization and are allowable under the governing cost principles; [2] The same costs that have been treated as indirect costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

B. ACCOUNTING CHANGES:

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from indirect to direct. Failure to obtain approval may result in cost disallowances.

C. FIXED RATES:

If a fixed rate is in this Agreement, it is based on an estimate of the costs for the period covered by the rate. When the actual costs for this period are determined, an adjustment will be made to a rate of a future year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

D. USE BY OTHER FEDERAL AGENCIES:

The rates in this Agreement were approved in accordance with the cost principles promulgated by the Department of Health and Human Services, and should be applied to the grants, contracts and other agreements covered by these regulations subject to any limitations in A above. The hospital may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

E. OTHER:

BY THE INSTITUTION:

If any Federal contract, grant or other agreement is reimbursing indirect costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected programs, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of indirect costs allocable to these programs.

ON BEHALF OF THE FEDERAL GOVERNMENT:

(b)(6)

Telephone:

| The New York & Presbyterian Hospital (Formerly: The New York & Presbyterian Hospitals Care Network.) | DEPARTMENT OF HEALTH AND HUMAN SERVICES |
|--|---|
| (b)(6) | (b)(6) |
| (SIGNATURE) | (SIGNATURE) |
| RICHARD EINWECHTER | Darryl W. Mayes |
| (NAME) | (NAME) |
| V.P. FINANCIAL OPERATIONS | Deputy Director, Cost Allocation Services |
| (TITLE) | (TITLE) |
| | 5/6/2016 |
| (DATE) | (DATE) 0224 |
| | HHS REPRESENTATIVE: Michael Stanco |

EMW-2020-GR-APP-00090

Application Information

Application Number: EMW-2020-GR-APP-00090

Funding Opportunity Name: Fiscal Year (FY) 2020 Targeted Violence and Terrorism Prevention (TVTP) Program

Funding Opportunity Number: DHS-20-TTP-132-00-01

Application Status: Pending Review

Applicant Information

Legal Name: The New York and Presbyterian Hospital

Organization ID: 21903

Type: Nonprofit having 501(c)(3) status with IRS, other than institutions of higher education

Division: Department:

EIN Shared With Organizations:

DUNS: 012729476

DUNS 4:

EIN:(b)(6)

Congressional District: Congressional District 12, NY

Physical Address

Address Line 1: 525 E 68th Street

Address Line 2: [Grantee Organization > Physical Address > Address 2]

City: New York State: New York Province:

Zip: 10065-4870

Country: UNITED STATES

Mailing Address

Address Line 1: 525 E 68th Street

Address Line 2: [Grantee Organization > Mailing Address > Address 2]

City: New York State: New York Province: Zip: 10065-4870

Country: UNITED STATES

SF-424 Information

Project Information

Project Title: NewYork-Presbyterian Hospital Active Shooter Training and Awareness

Program/Project Congressional Districts: Congressional District 12, NY

Proposed Start Date: Wed Sep 30 00:00:00 GMT 2020 Proposed End Date: Thu Sep 29 00:00:00 GMT 2022

Areas Affected by Project (Cities, Counties, States, etc.): Greater New York City Area (New York City, Westchester,

Hudson Valley)

Estimated Funding

| Funding Source | Estimated Funding (\$) |
|------------------------|------------------------|
| Federal Funding | \$149985 |
| Applicant Funding | \$0 |
| State Funding | \$0 |
| Local Funding | \$0 |
| Other Funding | \$0 |
| Program Income Funding | \$0 |
| Total Funding | \$149985 |

Is application subject to review by state under the Executive Order 12373 process? Program is not covered by E.O. 12372.

Is applicant delinquent on any federal debt? false

Contacts

| Contact Name | Email | Primary Phone Number | Contact Types |
|----------------|--------|----------------------|---------------------------------------|
| Michelle Perez | (b)(6) | | Authorized Official Secondary Contact |
| Annie Purcell | | | Primary Contact |
| Anne Sperling | | | Signatory Authority |

SF-424A

Budget Information for Non-Construction Programs

Grant Program: Targeted Violence and Terrorism Prevention Grant Program

CFDA Number: 97.132

| Budget Object Class | Amount | |
|-----------------------|----------|--|
| Personnel | \$0 | |
| Fringe Benefits | \$ | |
| Travel | \$10000 | |
| Equipment | \$0 | |
| Supplies | \$6350 | |
| Contractual | \$0 | |
| Construction | \$0 | |
| Other | \$120000 | |
| Indirect Charges | \$13635 | |
| Non-Federal Resources | Amount | |
| Applicant | \$0 | |
| State | \$0 | |
| Other | \$12000 | |
| Income | Amount | |
| Program Income | \$0 | |

How are you requesting to use this Program Income? [\$budget.programIncomeType]

Direct Charges Explanation: Indirect Charges explanation:

Forecasted Cash Needs (Optional)

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-------------|---------------|----------------|---------------|----------------|
| Federal | \$ | \$ | \$ | \$ |
| Non-Federal | \$ | \$ | \$ | \$ |

Future Funding Periods (Years) (Optional)

| First | Second | Third | Fourth |
|-------|--------|-------|--------|
| | \$ | \$ | \$ |

Remarks:

SF-424C

Budget Information for Construction Programs

Assurances for Non-Construction Programs

Form not applicable? false

Signatory Authority Name: Michelle Perez Signed Date: Tue Jun 16 00:00:00 GMT 2020

Signatory Authority Title: VP of Government and Community Affairs

Certification Regarding Lobbying

Form not applicable? false

Signatory Authority Name: Michelle Perez Signed Date: Tue Jun 16 00:00:00 GMT 2020

Signatory Authority Title: VP of Government and Community Affairs

Disclosure of Lobbying Activities

Form not applicable? false

Signatory Authority Name: Michelle Perez Signed Date: Tue Jun 16 00:00:00 GMT 2020

Signatory Authority Title: VP of Government and Community Affairs